

Attorney or Party Name, Address, Phone & Fax Nos.,
State Bar No. & Email

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FOR COURT USE ONLY

- ☐ Debtor(s) appearing without an attorney
☒ Attorney for Debtor(s)

**United States Bankruptcy Court
Central District of California - Riverside Division**

In re:
Yvonne Giovanna Stewart

CASE NO.: 6:23-bk-10196-SY
CHAPTER: Chapter 13

**DECLARATION BY DEBTOR(S)
AS TO WHETHER INCOME WAS RECEIVED
FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION
DATE**

[11 U.S.C. § 521(a)(1)(B)(iv)]

Debtor(s).

[No hearing required]

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

Declaration of Debtor 1

1. ☒ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

- ☒ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. *(If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)*
- ☐ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: 02/03/2023

Yvonne Giovanna Stewart
Printed name of Debtor 1

/s/ Yvonne Giovanna Stewart
Signature of Debtor 1

Declaration of Debtor 2 (Joint Debtor) (if applicable)

2. ☐ I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

- ☐ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. *(If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)*
- ☐ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: _____

Printed name of Debtor 2

Signature of Debtor 2



INDEPENDENT CONTRACTOR EARNINGS STATEMENT

DATE ISSUED:

02/01/2023

EARNING PERIOD:

07/01/2022 to 07/31/2022

ISSUER NAME:

TWOMAGNETS INC. D.B.A. CLIPBOARD HEALTH

ISSUER ADDRESS:

340 S LEMON AVE #5028

Walnut, CA 91789

ISSUER PHONE:

+1 (415) 508 8339

VENDOR NAME:

Yvonne Stewart

VENDOR ADDRESS:

412 Naylor Ave, Taft, CA 93268, USA

EARNINGS SUMMARY	
Services Provided	1099 Hourly Payment
Average Rate	US\$ 39.96
Total Hours	53.25
Total Gross Pay	US\$ 2127.71
Total Taxes Deductions	US\$ 0.00
Total Net Pay	US\$ 2127.71

Vendor is exclusively responsible for all Social Security, self-employment, and income taxes, disability insurance, workers' compensation insurance, any other statutory benefits otherwise required to be provided to employees, and all fees and licenses, if any



INDEPENDENT CONTRACTOR EARNINGS STATEMENT

DATE ISSUED:

02/01/2023

EARNING PERIOD:

08/01/2022 to 08/31/2022

ISSUER NAME:

TWOMAGNETS INC. D.B.A. CLIPBOARD HEALTH

ISSUER ADDRESS:

340 S LEMON AVE #5028

Walnut, CA 91789

ISSUER PHONE:

+1 (415) 508 8339

VENDOR NAME:

Yvonne Stewart

VENDOR ADDRESS:

412 Naylor Ave, Taft, CA 93268, USA

EARNINGS SUMMARY	
Services Provided	1099 Hourly Payment
Average Rate	US\$ 37.60
Total Hours	52.08
Total Gross Pay	US\$ 1958.09
Total Taxes Deductions	US\$ 0.00
Total Net Pay	US\$ 1958.09

Vendor is exclusively responsible for all Social Security, self-employment, and income taxes, disability insurance, workers' compensation insurance, any other statutory benefits otherwise required to be provided to employees, and all fees and licenses, if any



INDEPENDENT CONTRACTOR EARNINGS STATEMENT

DATE ISSUED:

02/01/2023

EARNING PERIOD:

09/01/2022 to 09/30/2022

ISSUER NAME:

TWOMAGNETS INC. D.B.A. CLIPBOARD HEALTH

ISSUER ADDRESS:

340 S LEMON AVE #5028

Walnut, CA 91789

ISSUER PHONE:

+1 (415) 508 8339

VENDOR NAME:

Yvonne Stewart

VENDOR ADDRESS:

412 Naylor Ave, Taft, CA 93268, USA

EARNINGS SUMMARY	
Services Provided	1099 Hourly Payment
Average Rate	US\$ 37.27
Total Hours	18.01
Total Gross Pay	US\$ 671.29
Total Taxes Deductions	US\$ 0.00
Total Net Pay	US\$ 671.29

Vendor is exclusively responsible for all Social Security, self-employment, and income taxes, disability insurance, workers' compensation insurance, any other statutory benefits otherwise required to be provided to employees, and all fees and licenses, if any



INDEPENDENT CONTRACTOR EARNINGS STATEMENT

DATE ISSUED:

02/01/2023

EARNING PERIOD:

10/01/2022 to 10/31/2023

ISSUER NAME:

TWOMAGNETS INC. D.B.A. CLIPBOARD HEALTH

ISSUER ADDRESS:

340 S LEMON AVE #5028

Walnut, CA 91789

ISSUER PHONE:

+1 (415) 508 8339

VENDOR NAME:

Yvonne Stewart

VENDOR ADDRESS:

412 Naylor Ave, Taft, CA 93268, USA

EARNINGS SUMMARY	
Services Provided	1099 Hourly Payment
Average Rate	US\$ 39.77
Total Hours	249.28
Total Gross Pay	US\$ 9914.15
Total Taxes Deductions	US\$ 0.00
Total Net Pay	US\$ 9914.15

Vendor is exclusively responsible for all Social Security, self-employment, and income taxes, disability insurance, workers' compensation insurance, any other statutory benefits otherwise required to be provided to employees, and all fees and licenses, if any



INDEPENDENT CONTRACTOR EARNINGS STATEMENT

DATE ISSUED:

02/01/2023

EARNING PERIOD:

11/01/2022 to 11/30/2022

ISSUER NAME:

TWOMAGNETS INC. D.B.A. CLIPBOARD HEALTH

ISSUER ADDRESS:

340 S LEMON AVE #5028

Walnut, CA 91789

ISSUER PHONE:

+1 (415) 508 8339

VENDOR NAME:

Yvonne Stewart

VENDOR ADDRESS:

412 Naylor Ave, Taft, CA 93268, USA

EARNINGS SUMMARY	
Services Provided	1099 Hourly Payment
Average Rate	US\$ 38.19
Total Hours	62.00
Total Gross Pay	US\$ 2367.66
Total Taxes Deductions	US\$ 0.00
Total Net Pay	US\$ 2367.66

Vendor is exclusively responsible for all Social Security, self-employment, and income taxes, disability insurance, workers' compensation insurance, any other statutory benefits otherwise required to be provided to employees, and all fees and licenses, if any



INDEPENDENT CONTRACTOR EARNINGS STATEMENT

DATE ISSUED:

02/01/2023

EARNING PERIOD:

12/01/2022 to 12/31/2022

ISSUER NAME:

TWOMAGNETS INC. D.B.A. CLIPBOARD HEALTH

ISSUER ADDRESS:

340 S LEMON AVE #5028

Walnut, CA 91789

ISSUER PHONE:

+1 (415) 508 8339

VENDOR NAME:

Yvonne Stewart

VENDOR ADDRESS:

412 Naylor Ave, Taft, CA 93268, USA

EARNINGS SUMMARY	
Services Provided	1099 Hourly Payment
Average Rate	US\$ 38.61
Total Hours	98.44
Total Gross Pay	US\$ 3801.18
Total Taxes Deductions	US\$ 0.00
Total Net Pay	US\$ 3801.18

Vendor is exclusively responsible for all Social Security, self-employment, and income taxes, disability insurance, workers' compensation insurance, any other statutory benefits otherwise required to be provided to employees, and all fees and licenses, if any



INDEPENDENT CONTRACTOR EARNINGS STATEMENT

DATE ISSUED:

02/01/2023

EARNING PERIOD:

01/01/2023 to 02/01/2023

ISSUER NAME:

TWOMAGNETS INC. D.B.A. CLIPBOARD HEALTH

ISSUER ADDRESS:

340 S LEMON AVE #5028

Walnut, CA 91789

ISSUER PHONE:

+1 (415) 508 8339

VENDOR NAME:

Yvonne Stewart

VENDOR ADDRESS:

9061 Evonvale Dr, Corona, CA 92883, USA

EARNINGS SUMMARY	
Services Provided	1099 Hourly Payment
Average Rate	US\$ 45.21
Total Hours	53.85
Total Gross Pay	US\$ 2434.66
Total Taxes Deductions	US\$ 0.00
Total Net Pay	US\$ 2434.66

Vendor is exclusively responsible for all Social Security, self-employment, and income taxes, disability insurance, workers' compensation insurance, any other statutory benefits otherwise required to be provided to employees, and all fees and licenses, if any



Employer Name: Health Net of California
Inc
Employer Phone: 1-833-462-7547
Employer Address: 7700 Forsyth Blvd
St. Louis, MO 63105

Employee Name: Monne G. Stewart
Employee #: 246692
Employee Address: 412 Naylor Ave
Taft, CA 93268
Pay Group: Health Net of California,
Inc.
Pay Type: Hourly

Pay Date: 1/6/2023
Pay Period: 12/18/2022 -
12/31/2022
Deposit Advice #: 567499955
Pay Frequency: Bi-Weekly
Pay Rate: 20.9100
Federal Filing Status: Single
Federal 2c/Extra Withholding: No/\$0.00
State Filing Status: Single; Alt Code 01
(CA)
State Exemptions: 3 (CA)

	Current 12/18/2022 - 12/31/2022			YTD As of 12/31/2022	
	Hours/Units	Rate	Amount	Hours/Units	Amount
Earnings	253.15		\$2,531.07	253.15	\$2,531.07
REGULAR	68.38	20.9100	\$1,429.90	68.38	\$1,429.90
HOLIDAY	24.00	20.9100	\$501.84	24.00	\$501.84
HOLIDAY WORKED	8.00	33.5937	\$268.75	8.00	\$268.75
LANGPREM	76.38	1.6728	\$127.77	76.38	\$127.77
SHFT2WD NE	4.00	1.6728	\$6.69	4.00	\$6.69
SHFT2WD OT	1.00	2.5092	\$2.51	1.00	\$2.51
SHFT3WD NE	39.37	2.0910	\$82.32	39.37	\$82.32
SHFT3WD OT	2.00	3.1365	\$6.27	2.00	\$6.27
SHFT2WE NE	3.00	2.0910	\$6.27	3.00	\$6.27
SHFT3WE NE	22.02	3.3456	\$73.66	22.02	\$73.66
SHFT3WE OT	5.00	5.0184	\$25.09	5.00	\$25.09
Memo Information			\$75.93		\$75.93
401K MATCH			\$75.93		\$75.93
Pre-Tax Deductions			\$419.22		\$419.22
401K %			\$253.11		\$253.11
Health (Pre-Tax)			\$148.73		\$148.73
Vision (Pre-Tax)			\$3.35		\$3.35
Dental (Pre-Tax)			\$10.19		\$10.19
Med Spending			\$3.84		\$3.84
Taxes			\$435.10		\$435.10
Fed W/H			\$181.00		\$181.00
FICA EE			\$146.63		\$146.63
Fed MWT EE			\$34.29		\$34.29
CA W/H			\$51.90		\$51.90
CA DT EE			\$21.28		\$21.28
Post-Tax Deductions			\$86.45		\$86.45
AD&D			\$2.17		\$2.17
Additional Life			\$33.97		\$33.97
United Way			\$25.00		\$25.00
ESPP%			\$25.31		\$25.31
	Routing #	Account #	Amount		Amount
Net Pay			\$1,590.30		\$1,590.30
Direct Deposit	322271724	XXXXXXXX0885	\$200.00		
Direct Deposit	322271627	XXXXX9227	\$1,390.30		

Other Payroll Information			
401K/403B Match Eligible Earnings	\$2,531.07	401K/403B Match Eligible Earnings YTD	\$2,531.07
Total Hours Worked	76.38		

Accruals & Balances	
PTO Balance:	46.78 Hours
Float Balance:	0.00 Days
Sick Balance:	0.00 Hours

CERIDIAN

Employer Name: Health Net of California
Inc
Employer Phone: 1-833-462-7547
Employer Address: 7700 Forsyth Blvd
St. Louis, MO 63105

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Employee Name: Monne O Stewart
Employee #: 246692
Employee Address: 412 Naylor Ave
Taft, CA 93268
Pay Group: Health Net of California,
Inc.
Pay Type: Hourly

Pay Date: 11/25/2022
Pay Period: 11/6/2022 -
11/19/2022
Deposit Advice #: 551740959
Pay Frequency: Bi-Weekly
Pay Rate: 20.9100
Federal Filing Status: Single
Federal 2c/Extra Withholding: No/\$0.00
State Filing Status: Single; Alt Code 01
(CA)
State Exemptions: 3 (CA)

	Current 11/6/2022 - 11/19/2022			YTD As of 11/19/2022	
	Hours/Units	Rate	Amount	Hours/Units	Amount
Earnings	220.76		\$1,940.27	4,914.60	\$47,803.03
OVERTIME				16.80	\$530.66
REGULAR	70.92	20.9100	\$1,482.87	1,502.90	\$30,003.03
ANNUAL BONUS CA					\$3,107.70
PTO	8.00	20.9100	\$167.28	139.00	\$2,761.78
DOUBLETIME				1.62	\$70.96
HOLIDAY				72.00	\$1,414.75
HOLIDAY WORKED				43.78	\$1,375.01
KEY CONTRIBUT					\$1,000.00
LANGPREM	70.92	1.6728	\$118.63	1,546.70	\$2,469.30
LANGPREM DT				1.62	\$5.15
LANGPREM OT				16.80	\$39.97
MEAL PRD PREM				17.00	\$397.94
SICK				56.00	\$1,093.85
SHFT2WD NE	6.00	1.6728	\$10.04	167.73	\$265.44
SHFT2WD OT				23.51	\$55.32
SHFT3WD DT				1.62	\$6.44
SHFT3WD NE	41.50	2.0910	\$86.77	743.38	\$1,489.23
SHFT3WD OT				13.61	\$40.43
SHFT2WE NE	2.92	2.0910	\$6.10	74.77	\$147.85
SHFT2WE OT				0.08	\$0.25
SHFT3WE NE	20.50	3.3456	\$68.58	445.40	\$1,426.01
SHFT3WE OT				17.00	\$81.23
SHFT1WE NE				13.28	\$20.73
Memo Information			\$58.21		\$1,340.85
401K MATCH			\$58.21		\$1,340.85
Pre-Tax Deductions			\$341.43		\$9,621.81
401K %			\$194.03		\$6,084.21
Health (Pre-Tax)			\$132.84		\$3,188.16
Vision (Pre-Tax)			\$3.35		\$80.40
Dental (Pre-Tax)			\$7.37		\$176.88
Med Spending			\$3.84		\$92.16
Taxes			\$305.81		\$8,365.31
Fed W/H			\$124.15		\$3,957.90
FICA EE			\$111.16		\$2,744.46
Fed MWT EE			\$26.00		\$641.85
CA W/H			\$24.78		\$534.17
CA DT EE			\$19.72		\$486.93
Post-Tax Deductions			\$75.02		\$4,707.25
AD&D			\$2.03		\$48.72
Additional Life			\$19.60		\$470.40
United Way					\$10.00
401K Loan					\$2,948.48
Loan 2			\$33.99		\$815.76
ESPP%			\$19.40		\$413.89
	Routing #	Account #	Amount		Amount
Net Pay			\$1,218.01		\$25,108.66

Accruals & Balances

CERIDIAN

Employer Name: Health Net of California
Inc
Employer Phone: 1-833-462-7547
Employer Address: 7700 Forsyth Blvd
St. Louis, MO 63105

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Employee Name: Monne O. Stewart
Employee #: 246692
Employee Address: 412 Naylor Ave
Taft, CA 93268
Pay Group: Health Net of California,
Inc.
Pay Type: Hourly

Pay Date: 12/9/2022
Pay Period: 11/20/2022 -
12/3/2022
Deposit Advice #: 556974571
Pay Frequency: Bi-Weekly
Pay Rate: 20.9100
Federal Filing Status: Single
Federal 2c/Extra Withholding: No/\$0.00
State Filing Status: Single; Alt Code 01
(CA)
State Exemptions: 3 (CA)

	Current 11/20/2022 - 12/3/2022			YTD As of 12/3/2022	
	Hours/Units	Rate	Amount	Hours/Units	Amount
Earnings	166.31		\$1,953.04	5,080.91	\$49,756.07
OVERTIME				16.80	\$530.66
REGULAR	37.10	20.9100	\$775.76	1,540.00	\$30,778.79
ANNUAL BONUS CA					\$3,107.70
PTO	24.00	20.9100	\$501.84	163.00	\$3,263.62
DOUBLETIME				1.62	\$70.96
HOLIDAY	16.00	20.9100	\$334.56	88.00	\$1,749.31
HOLIDAY WORKED	5.00	33.4567	\$167.28	48.78	\$1,542.29
KEY CONTRIBUT					\$1,000.00
LANGPREM	42.11	1.6728	\$70.44	1,588.81	\$2,539.74
LANGPREM DT				1.62	\$5.15
LANGPREM OT				16.80	\$39.97
MEAL PRD PREM				17.00	\$397.94
SICK				56.00	\$1,093.85
SHFT2WD NE	3.15	1.6728	\$5.27	170.88	\$270.71
SHFT2WD OT				23.51	\$55.32
SHFT3WD DT				1.62	\$6.44
SHFT3WD NE	23.00	2.0910	\$48.09	766.38	\$1,537.32
SHFT3WD OT	5.00	3.1365	\$15.68	18.61	\$56.11
SHFT2WE NE	2.00	2.0910	\$4.18	76.77	\$152.03
SHFT2WE OT				0.08	\$0.25
SHFT3WE NE	8.95	3.3456	\$29.94	454.35	\$1,455.95
SHFT3WE OT				17.00	\$81.23
SHFT1WE NE				13.28	\$20.73
Taxable Benefits			\$35.00		\$35.00
GIFT CERT - E			\$35.00		\$35.00
Memo Information			\$58.59		\$1,399.44
401K MATCH			\$58.59		\$1,399.44
Pre-Tax Deductions			\$342.70		\$9,964.51
401K %			\$195.30		\$6,279.51
Health (Pre-Tax)			\$132.84		\$3,321.00
Vision (Pre-Tax)			\$3.35		\$83.75
Dental (Pre-Tax)			\$7.37		\$184.25
Med Spending			\$3.84		\$96.00
Taxes			\$321.52		\$8,686.83
Fed W/H			\$132.62		\$4,090.52
FICA EE			\$114.12		\$2,858.58
Fed MWT EE			\$26.69		\$668.54
CA W/H			\$27.85		\$562.02
CA DT EE			\$20.24		\$507.17
Post-Tax Deductions			\$75.15		\$4,782.40
AD&D			\$2.03		\$50.75
Additional Life			\$19.60		\$490.00
United Way					\$10.00
401K Loan					\$2,948.48
Loan 2			\$33.99		\$849.75
ESPP%			\$19.53		\$433.42

Accruals & Balances

Employer Name: Health Net of California
 Inc
Employer Phone: 1-833-462-7547
Employer Address: 7700 Forsyth Blvd
 St. Louis, MO 63105

Employee Name: Yvonne G Stewart
Employee #: 246692
Employee Address: 412 Naylor Ave
 Taft, CA 93268
Pay Group: Health Net of California,
 Inc.
Pay Type: Hourly

Pay Date: 12/9/2022
Pay Period: 11/20/2022 -
 12/3/2022
Deposit Advice #: 556974571
Pay Frequency: Bi-Weekly
Pay Rate: 20.9100
Federal Filing Status: Single
Federal 2c/Extra Withholding: No/\$0.00
State Filing Status: Single; Alt Code 01
 (CA)
State Exemptions: 3 (CA)

	Routing #	Account #	Amount	Amount
Net Pay			\$1,213.67	\$26,322.33
Direct Deposit	322271724	XXXXXXXX0885	\$200.00	
Direct Deposit	322271627	XXXXX9227	\$1,013.67	

Other Payroll Information			
401K/403B Match Eligible Earnings	\$1,953.04	401K/403B Match Eligible Earnings YTD	\$49,756.07
Total Hours Worked	42.10		

Accruals & Balances					
PTO Balance:	41.24 Hours	PTO Accrued:	5.54 Hours	PTO Taken:	24.00 Hours
Float Balance:	0.00 Days				
Sick Balance:	0.00 Hours				

CERIDIAN

Employer Name: Health Net of California
Inc
Employer Phone: 1-833-462-7547
Employer Address: 7700 Forsyth Blvd
St. Louis, MO 63105

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Employee Name: Monne O Stewart
Employee #: 246692
Employee Address: 412 Naylor Ave
Taft, CA 93268
Pay Group: Health Net of California,
Inc.
Pay Type: Hourly

Pay Date: 12/23/2022
Pay Period: 12/4/2022 -
12/17/2022
Deposit Advice #: 562389644
Pay Frequency: Bi-Weekly
Pay Rate: 20.9100
Federal Filing Status: Single
Federal 2c/Extra Withholding: No/\$0.00
State Filing Status: Single; Alt Code 01
(CA)
State Exemptions: 3 (CA)

	Current 12/4/2022 - 12/17/2022			YTD As of 12/17/2022	
	Hours/Units	Rate	Amount	Hours/Units	Amount
Earnings	232.50		\$1,942.96	5,313.41	\$51,699.03
OVERTIME				16.80	\$530.66
REGULAR	77.50	20.9100	\$1,620.53	1,617.50	\$32,399.32
ANNUAL BONUS CA					\$3,107.70
PTO				163.00	\$3,263.62
DOUBLETIME				1.62	\$70.96
HOLIDAY				88.00	\$1,749.31
HOLIDAY WORKED				48.78	\$1,542.29
KEY CONTRIBUT					\$1,000.00
LANGPREM	77.50	1.6728	\$129.64	1,666.31	\$2,669.38
LANGPREM DT				1.62	\$5.15
LANGPREM OT				16.80	\$39.97
MEAL PRD PREM				17.00	\$397.94
SICK				56.00	\$1,093.85
SHFT2WD NE	6.00	1.6728	\$10.04	176.88	\$280.75
SHFT2WD OT				23.51	\$55.32
SHFT3WD DT				1.62	\$6.44
SHFT3WD NE	42.00	2.0910	\$87.82	808.38	\$1,625.14
SHFT3WD OT				18.61	\$56.11
SHFT2WE NE	3.00	2.0910	\$6.27	79.77	\$158.30
SHFT2WE OT				0.08	\$0.25
SHFT3WE NE	26.50	3.3456	\$88.66	480.85	\$1,544.61
SHFT3WE OT				17.00	\$81.23
SHFT1WE NE				13.28	\$20.73
Taxable Benefits					\$35.00
GIFT CERT - E					\$35.00
Memo Information			\$58.29		\$1,457.73
401K MATCH			\$58.29		\$1,457.73
Pre-Tax Deductions			\$341.70		\$10,306.21
401K %			\$194.30		\$6,473.81
Health (Pre-Tax)			\$132.84		\$3,453.84
Vision (Pre-Tax)			\$3.35		\$87.10
Dental (Pre-Tax)			\$7.37		\$191.62
Med Spending			\$3.84		\$99.84
Taxes			\$306.49		\$8,993.32
Fed W/H			\$124.44		\$4,214.96
FICA EE			\$111.32		\$2,969.90
Fed MWT EE			\$26.03		\$694.57
CA W/H			\$24.94		\$586.96
CA DT EE			\$19.76		\$526.93
Post-Tax Deductions			\$72.78		\$4,855.18
AD&D			\$2.03		\$52.78
Additional Life			\$19.60		\$509.60
United Way					\$10.00
401K Loan					\$2,948.48
Loan 2			\$31.72		\$881.47
ESPP%			\$19.43		\$452.85

Accruals & Balances

Employer Name: Health Net of California Inc
Employer Phone: 1-833-462-7547
Employer Address: 7700 Forsyth Blvd
 St. Louis, MO 63105

Employee Address: 412 Naylor Ave
 Taft, CA 93268
Pay Group: Health Net of California, Inc.
Pay Type: Hourly

Pay Date: 11/25/2022
Pay Period: 11/6/2022 - 11/19/2022
Deposit Advice #: 551740959
Pay Frequency: Bi-Weekly
Pay Rate: 20.9100
Federal Filing Status: Single
Federal 2c/Extra Withholding: No/\$0.00
State Filing Status: Single; Alt Code 01 (CA)
State Exemptions: 3 (CA)

	Routing #	Account #	Amount	Amount
Direct Deposit	322271724	XXXXXX0885	\$200.00	
Direct Deposit	322271627	XXXXX9227	\$1,018.01	

Other Payroll Information

401K/403B Match Eligible Earnings	\$1,940.27	401K/403B Match Eligible Earnings YTD	\$47,803.03
Total Hours Worked	70.92		

Accruals & Balances

PTO Balance:	59.70 Hours	PTO Accrued:	5.54 Hours	PTO Taken:	8.00 Hours
Float Balance:	0.00 Days				
Sick Balance:	0.00 Hours				

	Routing #	Account #	Amount	Amount
Net Pay			\$1,221.99	\$27,544.32
Direct Deposit	322271724	XXXXXXXX0885	\$200.00	
Direct Deposit	322271627	XXXXX9227	\$1,021.99	

Other Payroll Information			
401K/403B Match Eligible Earnings	\$1,942.96	401K/403B Match Eligible Earnings YTD	\$51,699.03
Total Hours Worked	77.50		

Accruals & Balances			
PTO Balance:	46.78 Hours	PTO Accrued:	5.54 Hours
Float Balance:	0.00 Days		
Sick Balance:	0.00 Hours		

CO. FILE DEPT. CLOCK CHK. NO.
L06 101297 100400 0000099711

Earnings Statement

FACILITIES PAYROLL SERVICES
/ CALIFORNIA HEALTHCARE & REHAB, 4032
WILSHIRE BL 6TH FL
LOS ANGELES, CA 90010

Period Beginning: 12/01/2022
Period Ending: 12/15/2022
Pay Date: 12/20/2022 /

Filing Status: Single or Married Filing Separately

Social Security Number: XXX-XX-9596

Earnings	Rate	Hours	This Period
Regular	32.0000	66.20 ✓	2,118.40
Overtime	48.0000	19.73 ✓	947.04
Double Time	64.0000	0.78 ✓	49.92
Missed Meal	32.0000	5.00 ✓	160.00
Vacation Paid	32.0000	28.93 ✓	925.76
Gross Pay		\$	4,201.12

Deductions	Statutory	
	Federal Income Tax	279.46 -
	Social Security Tax	257.62 -
	Medicare Tax	60.25 -
	CA State Disability Ins	45.70 -
	CA State Income Tax	255.36 -
	Other	
	Assurant LT Dis	46.06 -
	Net Pay	\$ 3,256.67
	Net Check	\$ 3,256.67

YVONNE G STEWART
412 NAYLOR AVE
TAFT, CA 93268

Important Notes**Other Benefits and
Information****This Period**




SEQ 000927
 NORMANDIE WILSHIRE RETIREMENT HOTEL INC
 DBA CALIFORNIA HEALTHCARE AND REHAB CENTER
 4032 WILSHIRE BL 6TH FL
 LOS ANGELES, CA 90010

Period Beginning: 11/16/2022
 Period Ending: 11/30/2022
 Pay Date: 12/09/2022

Filing Status: Single/Married filing separately
 Exemptions/Allowances:
 Federal: Standard Withholding Table

YVONNE G STEWART
 412 NAYLOR AVE
 TAFT CA 93268

Social Security Number: XXX-XX-9596

Earnings	rate	hours	this period	year to date
Regular	32.0000	53.77	1,720.64	48,462.43
Overtime	48.0000	11.50	552.00	18,843.36
Double Time	64.0000	3.90	249.60	5,178.90
Holiday Pay	32.0000	8.00	256.00	1,024.00
Sick Payout				1,536.00
Testing				189.00
Gross Pay			\$2,778.24	78,841.69

Other Benefits and Information

	this period	total to date
Sic Pay Bal	48.00	
Totl Hrs Worked	69.17	
Sick Available		48.00

Important Notes

IF NO CA Spst Used IS LISTED YOU HAVE USED ZERO HRS

Deductions

Statutory

Social Security Tax	-170.82	4,856.77
Medicare Tax	-39.95	1,135.86
CA State Income Tax	-63.61	2,937.31
CA SDI Tax	-30.31	861.69
Federal Income Tax		1,681.37

Other

Assurant Lt Dis	-23.03*	506.66
401K Savings	-555.65*	14,312.69

Net Pay **\$1,894.87**

Checking 1 -1,894.87

Net Check **\$0.00**

Additional Tax Withholding Information

Taxable Marital Status:
 CA: Single
 Exemptions/Allowances:
 CA: 2

* Excluded from federal taxable wages

Your federal taxable wages this period are
 \$2,199.56

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VERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

NORMANDIE WILSHIRE RETIREMENT HOTEL INC
 DBA CALIFORNIA HEALTHCARE AND REHAB CENTER
 4032 WILSHIRE BL 6TH FL
 LOS ANGELES, CA 90010

Advice number: 00000490016
 Pay date: 12/09/2022

Deposited to the account of
 YVONNE G STEWART

account number	transit ABA	amount
xxxxx9227	xxxx xxxx	\$1,894.87

THIS IS NOT A CHECK

NON-NEGOTIABLE

PERSONAL AND CHECK INFORMATION

Yvonne Stewart
412 Noylor Avenue
Taft, CA 93260
Soc Sec #: xxx-xx-9596 Employee ID: 619

Home Department: 200 Hourly

Pay Period: 12/18/22 to 12/31/22

Check Date: 01/06/23 Check #: 12869

NET PAY ALLOCATIONS

DESCRIPTION	THIS PERIOD (\$)	YTD (\$)
Check Amount	1744.07	1744.07
NET PAY	1744.07	1744.07

EARNINGS	BASIS OF DESCRIPTION	HRS/UNITS	RATE	THIS PERIOD (\$)	YTD HOURS	YTD (\$)
Hourly		58.0000	37.0000	2146.00	58.0000	2146.00
Total Hours		58.0000				
Gross Earnings				2146.00		2146.00
Total Hrs Worked		58.0000				
WITHHOLDINGS						
DESCRIPTION	FILING STATUS			THIS PERIOD (\$)		YTD (\$)
Social Security				133.05		133.05
Medicare				31.12		31.12
Fed Income Tax	M 1			152.44		152.44
CA Income Tax	SMI2 1 0			66.01		66.01
CA Disability				19.31		19.31
TOTAL				401.93		401.93

NET PAY	THIS PERIOD (\$)	YTD (\$)
	1744.07	1744.07

Payrolls by Paychex, Inc.

0942 1606-7289 Conejo Valley Congregate Healthcare Inc • 1225 Lawrence Way • Oxnard CA 93035 • (818) 880-8600